

QUICK BRIEFING:

A 2004-05 Mental Health Initiative



BACKGROUND: Medical Assistance Administration (MAA), the Health Care Authority (HMCA) and the Department of Labor & Industries (L&I) have formed a partnership Prescription Drug Project (PDP) that identifies preferred drugs based on scientific research on the safety and efficacy of medications. The PDP helps prescribers deliver the most effective medications at the most efficient price.

THE MEDICATION: Drugs used to treat depression and mental illness -- known as Selective Serotonin Reuptake Inhibitors (SSRIs) and "atypicals" -- have not been listed so far among the classes in the PDP for several reasons:

Medication forum: MAA will host a presentation of these issues at 9 a.m. on December 16 at the SeaTac Holiday Inn.

- 1) **Antidepressant therapy is complicated** -- prescribers in the past have had to rely on trial and error to find the most effective medication for a patient.
- 2) **Psychotherapy utilization has increased dramatically in recent years**, with clients and prescribers often strongly tied emotionally and intellectually to medication that works.
- 3) **Oregon Health Sciences University (OHSU), which conducts the foundation research for Washington State, only recently reviewed the SSRIs** and will release its report on atypicals in the spring of 2005 for the Pharmacy & Therapeutics Committee to review.

RECENT DEVELOPMENTS: Recently, the American College of Physicians and American Society of Internal Medicine, the American Psychiatric Association, and the Veterans Health Administration-Department of Defense have established general guidelines for depression medication. In addition, MAA's own Drug Utilization Review studies have identified significant therapeutic duplication of SSRIs and atypical antipsychotics in current practice. Numerous studies indicate that atypicals can produce metabolic abnormalities ranging from glucose intolerance and diabetes mellitus to weight gain and hyperprolactinemia. Therapeutic duplication of these medications can result in significant adverse events, and there is a lack of clinical evidence to support this practice at this time. Further, Massachusetts has successfully implemented preauthorization in these classifications, including information and education for providers and patients to explain and justify better utilization guidelines.

MAA'S MENTAL HEALTH INITIATIVE: Based on current research and working with HRSA, MAA is proposing to add hard edits for therapeutic duplication for SSRIs. MAA will begin hosting a series of monthly meetings to guide the implementation of "Best Practices" in mental health drug therapy. The hard edit override criteria would include permission for prescribers to taper dosage to discontinue one agent and transition to another over 60 days. Prescribers would be notified when their patients are receiving therapeutic duplication of drugs within the SSRI drug class. MAA will begin a similar evidence-based review of therapeutic duplication of atypical antipsychotics, and other mental health initiatives proven successful in the Massachusetts Medicaid program. Overall, this program will improve quality and safety to Medicaid clients.

NEXT STEPS: MAA will host a forum to introduce and discuss the Mental Health Initiative at **9 a.m. on Dec. 16 in the Earhart Conference Room of the SeaTac Holiday Inn**. The Chief Medical Officer of the Massachusetts Medicaid Program, Annette Hanson, M.D., will describe her state's experience with these changes. Jeffery Thompson, M.D., Chief Medical Officer of the Washington State program, and Siri Childs, Pharm.D., Pharmacy Policy Manager, will be present to explain Washington State's initiative and the timetable for adoption. Providers, representatives of provider organizations and stakeholders are welcome to attend the forum.